

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000006159

FILED
Jan 04, 2005
Secretary of State

Entity Name: NETWORK ADJUSTERS INCORPORATED

Current Principal Place of Business:

1055 FRANKLIN AVE
GARDEN CITY, NY 11530 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 6008
GARDEN CITY, NY 11530 US

New Mailing Address:

FEI Number: 11-2999619

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AHERN, MARK J
Address: 1055 FRANKLIN AVE
City-St-Zip: GARDEN CITY, NY

Title: SD () Delete
Name: LIMONCELLI, GARY
Address: 1055 FRANKLIN AVE
City-St-Zip: GARDEN CITY, NY

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY LIMONCELLI

VP

01/04/2005

Electronic Signature of Signing Officer or Director

Date